

# FACILITY COMPLIANCE AUDIT REPORT

# Division of Waste Management Solid Waste Section



UNIT T	YPE: (check all	that apply	to this	audit v	vith s	ame Permit	number)	
Lined MSWLF	LCID	YW	i	ransfer	X	Compost	SLAS	COUNTY: Yancey County
Closed MSWLF	HHW	White goods	X	Incin		T&P	FIRM	PERMIT NO.: 100-03T
CDLF	Tire T&P / Collection	Tire Monofill	_	idustrial andfill		DEMO	SDTF	FILE TYPE: COMPLIANCE

Date of Audit: June 7, 2002.

Date of Last Audit: March 25, 2002.

Fac/Perm/Co ID # Date Doc ID#

## **FACILITY NAME AND ADDRESS:**

Yancey County Transfer Station Booneford Rd, Bandana, NC. 28714

# **FACILITY CONTACT NAME AND PHONE NUMBER:**

Tom Tipton, Public Works Director 828-678-9180

#### **FACILITY CONTACT ADDRESS (IF DIFFERENT):**

Court House, Room 13, Burnsville, NC. 28714

### **AUDIT PARTICIPANTS:**

Albert A. Hetzell WMS, Solid Waste Section, DENR

### **STATUS OF PERMIT:**

Active

#### PURPOSE OF AUDIT:

Comprehensive Audit

# NOTICE OF VIOLATION(S) (citation and explanation): None

You are hereby advised that, pursuant to N.C.G.S. 130A-22, an administrative penalty of up to \$5,000 per day may be assessed for each violation of the Solid Waste Statute or Regulations. If the violation(s) noted here continue, you may be subject to enforcement actions including penalties, injunction from operation of a solid waste management facility or a solid waste collection service and any such further relief as may be necessary to achieve compliance with the North Carolina Solid Waste Management Act and Rules.

#### STATUS OF PAST NOTED VIOLATIONS (List all noted last audit): None

## OTHER COMMENTS / SUGGESTIONS:

- 1.) Floor in need of repair. Noted cracks in tipping floor and steel lip on loading bay cracked and broken away from concrete floor.
- 2.) Overall operation OK, loading bay cleaned, tipping floor being squeegeed periodically.

Please contact me if you have any questions or concerns regarding this audit report.

Phone: 828-251-6784 ext. 280
Regional Representative/WMS

	 T			1	
Mailed on : June 11, 2002 by	hand delivery	X	US Mail		Certified No. [_]
					<u> </u>

Distribution: original signed copy to facility - signed copy to compliance officer - email or copy to supervisor